

June 1, 1971

Honorable Gaylord Nelson and
Honorable Alan Cranston
Committee on Labor and Public Welfare
United States Senate
Washington, D.C. 20510

Dear Gaylord, dear Alan,

Thank you for your letter of May 25th and for having introduced amendment 109 to the conquest of cancer act, S.34.

As you may know I was, officially speaking, a member of the national panel of consultants on the conquest of cancer although I was unable to take a very active role in the deliberation that led to the final report. When I lent my name to the panel's recommendations I did not regard the question of a separate cancer agency as the focal issue and whatever misgivings I had at that time were outweighed by the evident need to convey a proper sense of urgency about dealing with the cancer problem. Against a background of chronically deteriorating financial and administrative support for cancer research and for health research generally, over the past several years, the establishment of a new agency would have been an improvement over the then existing situation. This is not to say that it could ever been regarded as the ideal solution. I did not believe it then and now that such an encouraging level of public attention has been directed to cancer research I believe that we can formulate far better ways of dealing with the problem than were embodied in the panel report at that time. In the interval, as the draft legislation has progressed, it has also become apparent that the textual formulation of the bill put the final authority and responsibility for the oversight of the program at ever greater distance from the competent scientific community, in the name of "efficient businesslike management". I do not believe that this aspect of the proposal was ever the intention of the research-experienced members of the panel.

Having now taken into account the new initiatives by the President and by Secretary Richardson towards the reinvigoration of cancer research I must now give greater weight to the obvious demerits of separating the cancer program from other functions of NIH. Such a separation could be disastrous with respect both to cancer and to health progress generally. Whatever path is taken should avoid that contingency!

Much has been made of some of the administrative difficulties that have indeed impeded many initiatives for progress in cancer. However, these difficulties are in no way a result of the association of cancer research within the NIH but have to do with the relative invisibility of NIH within the department of HEW. Furthermore, congressional appropriation practices relating to HEW but also impinging directly on NIH have been one of the major sources of difficulty. I refer to the appropriation of funds authorized for only a single fiscal year but many

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times at least 6 months after the year had actually begun! Having to face such legal obstacles is no wonder that NIH officials had great difficulty in administering research funds and that adverse ways had been made throughout the whole process of federally supported health research. It should take little imagination to see the impact of such delays and uncertainties on our plans for exploring what is, by definition, the unknown. These then are the major difficulties that should be addressed by legislative remedies. S.34 is a gratifying response to the fundamental motive of starting new paths for the solution of the cancer problem as stated in your speech of May 21st however "the only difference of opinion is over what is the best approach to accomplish this end".

The proposal embodied in your amendment is, in my view, the most responsive and creative answer to these challenges. As a matter of general principle I would strongly favor the establishment of the NIH as a separate agency freed from the entangled web of concerns that are a necessary accompaniment of the enormous diversified responsibilities of the department of HEW. However, we are not starting from a blank tablet but must deal with an existing organization and there may be costs connected with the extraction of NIH that are not revealed by a superficial analysis. Furthermore, this is an era of basic re-appraisal of the executive establishment and it may be desirable to re-analyze the placement of NIH in the light of reorganization plans already before the Congress. I am sure that these considerations will be amply ventilated in the hearings before your subcommittee and that due account will be taken of them. This is merely to suggest that despite the prime merits of independent agency status for NIH as a whole the administration should be given an opportunity to develop its program and its own case about the reorganization of the health-related functions of the federal establishment.

The most important consideration of those mentioned remains, however, that the cancer program should not be separated from other facets of health research. Such a separation by itself will solve none of the urgent problems of research administration and the legislative remedies for those problems are as important for the remainder of NIH as they are for cancer work.

With respect to the national cancer advisory board I am gratified that you have taken care to preserve all the functions of the old advisory council. It is not clear to me that section 7 indeed accomplishes the same end with respect to the advisory councils of the other institutes within the NIH. I would urge that you give this legal detail whatever attention may be needed to clarify it. But I believe that the operation of these councils, which are the principal organ of responsibility for the scientific integrity of grant-based programs, should be strengthened. At the present time most of the councils have the obligation to approve individual grants before they may be awarded, a function which as you know is in fact implemented primarily by expert study sections who forward their recommendations to the council. This is a rather inflexible arrangement which often ties the council's hands for fear of imposing unwarrantable delays. The council would in fact be strengthened if it were authorized

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to delegate the final approval for grants to which it may have given contingent approval subject to whatever specific procedures and guidelines and other criteria it may have established. This is the best way that a council that may be able to meet only three or four times a year can still maintain its wise oversight of the scientific grant program without imposing the burdens and delay of repeated postponements from one council meeting to another.

As this is one of the principal objections to the current operation of the national cancer institute mentioned by its critique~~st~~ it may warrant giving a requisite amount of attention to this problem.

Again let me say that the bill S.34 as amended promises to be one of the most important positive steps in behalf of health research in recent years.

Sincerely yours,

Joshua Lederberg
Professor of Genetics

JL/rr